

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF OHIO  
WESTERN DIVISION AT DAYTON

**NOTICE TO APPEAR**

VIOLATION NUMBER	LOCATION CODE	DATE OF VIOLATION NOTICE
9722554	OS52	JUNE 24, 2021

You are notified that you must appear and respond to this violation at the following address on the date circled below:

**Walter H. Rice Federal Building & U.S. Courthouse  
200 West Second Street  
Fifth Floor, Courtroom 4  
Dayton, Ohio 45402**

In calendar year 2021, court will be held on the following dates. You **must** appear on the date circled below:

January 28, 2021 at 2:30 pm	July 29, 2021 at 2:30 pm
February 25, 2021 at 2:30 pm	August 26, 2021 at 2:30 pm
March 25, 2021 at 2:30 pm	September 30, 2021 at 2:30 pm
April 29, 2021 at 2:30 pm	October 28, 2021 at 2:30 pm
May 27, 2021 at 2:30 pm	November 18, 2021 at 2:30 pm
<u>June 24, 2021 at 2:30 pm</u>	December 30, 2021 at 2:30 pm

**FAILURE TO APPEAR AS REQUIRED ON THE DATE AND  
TIME ABOVE MAY RESULT IN THE ISSUANCE OF A  
WARRANT FOR YOUR ARREST**

Defendant's Signature: \_\_\_\_\_

*Doug Powers*

STATEMENT OF PROBABLE CAUSE  
(For issuance of an arrest warrant or summons)

I state that on 05/09/2021 while exercising my duties as a  
law enforcement officer in the \_\_\_\_\_ District of \_\_\_\_\_

The foregoing statement is based upon:

- ☒ my personal observation ☒ my personal investigation  
☐ information supplied to me from my fellow officer's observation  
☐ other (explain above)

I declare under penalty of perjury that the information which I have set forth above and on the face of this violation notice is true and correct to the best of my knowledge.

Executed on: 05/09/2021  
Date (mm/dd/yyyy) Officer's Signature

Probable cause has been stated for the issuance of a warrant.

Executed on: \_\_\_\_\_  
Date (mm/dd/yyyy) U.S. Magistrate Judge

HAZMAT = Hazardous material involved in incident; PASS = 9 or more passenger vehicle;  
CDL = Commercial drivers license; CMV = Commercial vehicle involved in incident

United States District Court  
Violation Notice

(Rev. 1/2019)

Location Code <u>OS-52</u>	Violation Number <u>9722554</u>	Officer Name (Print) <u>T. JENKINS</u>	Officer No. <u>4698</u>
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YOU ARE CHARGED WITH THE FOLLOWING VIOLATION

Date and Time of Offense <u>05/09/2021 0323</u>	Offense Charged <input checked="" type="checkbox"/> CFR <input type="checkbox"/> USC <input type="checkbox"/> State Code <u>38 CFR 1.218 (b) (6)</u>
Place of Offense <u>Building 330 / 5 South</u>	

Offense Description: Factual Basis for Charge

HAZMAT ☐

FAILURE TO Comply with Signs of a  
Directive and Restrictive Nature  
Posted for Safety Purposes.

DEFENDANT INFORMATION Phone: ( )

Last Name <u>POWERS</u>	First Name <u>DOUGLAS</u>	M.I. <u>E</u>
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DRIVER'S LICENSE NO. <u>RA 192889</u>	CDL <input type="checkbox"/> U.S. State <u>OH</u>	SOCIAL SECURITY NO. <u>0418</u>
<input checked="" type="checkbox"/> Adult <input type="checkbox"/> Juvenile	Sex <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Hair <u>BRO</u> Eyes <u>BRO</u> Height <u>603</u> Weight <u>242</u>
VEHICLE VIN: _____		CMV <input type="checkbox"/>

Tag No.	State	Year	Make/Model	PASS <input type="checkbox"/>	Color
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APPEARANCE IS REQUIRED

A ☒ If Box A is checked, you must appear in court. See instructions.

APPEARANCE IS OPTIONAL

B ☐ If Box B is checked, you must pay the total collateral due or in lieu of payment appear in court. See instructions.

\$ \_\_\_\_\_ Forfeiture Amount  
+ \$30 Processing Fee

PAY THIS AMOUNT AT  
[www.cvb.uscourts.gov](http://www.cvb.uscourts.gov)

\$ \_\_\_\_\_ Total Collateral Due

YOUR COURT DATE

(If no court appearance date is shown, you will be notified of your appearance date by mail.)

Court Address	Date
	Time

My signature signifies that I have received a copy of this violation notice. It is not an admission of guilt. I promise to appear for the hearing at the time and place instructed or in lieu of appearance pay the total collateral due.

X Defendant Signature

Original - CVB Copy

\*9722554\*

Violation Number: 9722554 CVB Location Code: 0552

I state that on 05/09/2021 while exercising my duties as a  
law enforcement officer in the Southern District of Ohio

On Sunday, May 9, 2021 at 0323, I was  
dispatched to building 330/5 South to investigate  
a patient smoking in his room. Mr. Powers  
denied smoking in his room to 5 South staff but  
to me, he admitted smoking in his room. he  
cooperated with me by signing both, his citation  
and his Notice to Appear form.

Officer's Name:

Officer T. Jenkins





DEPARTMENT OF VETERANS AFFAIRS POLICE  
552 - DAYTON VAMC - VISN 10  
4100 W. 3RD STREET  
DAYTON, OH, 45428

## Incident Report

Reported by: JENKINS, TERRANCE E

Incident Types Label FEDERAL : CFR : 38 CFR 1.218(B) : [90Z] - (06) Incident Disposition CITED AND RELEASED  
FAILURE TO COMPLY WITH SIGNS OF A  
DIRECTIVE AND RESTRICTIVE NATURE POSTED  
FOR SAFETY PURPOSES (MISDEMEANOR)  
Offender POWERS, DOUGLAS EUGENE (SUSPECT)

Report Disposition	Method of Reporting	
	PHONE	
Report Recorder	Manager/Supervisor On Duty	Manager/Supervisor Notified
JENKINS, TERRANCE E	CALDWELL, WILLIAM E	YES
Incident Occurred Date	Incident Occurred End Date	Incident Discovered / Called In
05/09/2021 at 0319	05/09/2021 at 0500	05/09/2021 at 0323

Location	Specific Location
DAYTON VA MEDICAL CENTER : BUILDING : B330	5 SOUTH/ROOM 5D-119

## Report Synopsis/Overview

Police was dispatched to building 330/5 South to investigate a patient smoking in his room. Patient was contacted and issued a citation for failure to comply with signs and directives.

Contact # 1 (VA EMPLOYEE)				
Full Name				
STACY SHAY SCHUTTE				
Age	Date of Birth	Gender	Race	
42	02/18/1979	FEMALE	WHITE	
Height	Weight	Hair Color	Eye Color	
5'04"	172	BLACK	GRAY	
Department			Title	
NURSING SERVICE				
Addresses				
Street Number	Street Direction	Street Name	Street Type	Apt./Suite
2487		HAWTHORNE	COURT	
City	State	Zip	Country	Address Type
BROOKVILLE	OHI	45309		HOME

Contact # 2 (SUSPECT)		
Full Name		
DOUGLAS EUGENE POWERS		
Drivers License	Drivers License State	Email Address
RN192889	OH	

Prepared By:	Submitted Date
JENKINS, TERRANCE E(TERRANCE.JENKINS@VA.GOV)	05/10/2021 0249
Signature	Reviewed By/Date
	JOHNSON, LACARIO A 05/10/2021 1247

Age	Date of Birth	Gender	Race
58	01/09/1963	MALE	WHITE
Height	Weight	Hair Color	Eye Color
6'03"	242	BROWN	BROWN

## Addresses

Street Number	Street Direction	Street Name	Street Type	Apt./Suite
400	WEST	COLUMBUS	ROAD	L
City	State	Zip	Country	Address Type
S CHARLESTON	OH	45368		HOME

## Phones :

(HOME) 9374629205

Narrative text

On Sunday, May 9, 2021 at 0323, I was dispatched to building 330/5 South to investigate a patient smoking in his room.

Upon arrival I met with Nursing Assistant (NA) Stacy Schultz in front of (suspect) Mr. Eugene Powers room.

My investigation revealed when I entered the 5 South Ward, I can smell cigarette smoke as it became stronger the closer I came to Powers room. Schultz told me he has been denying smoking in the room.

Powers was asleep when I entered his room. I woke him up, introduced myself as Police Officer Jenkins and I asked Powers if he was smoking, he paused for a quick moment and I advised "do not lie to me", and he admitted he was smoking in his bathroom and flushed the cigarette down the toilet. I asked Powers if he knew that smoking was illegal in the hospital and he stated "yes, he knew".

I informed Powers, I will be issuing him a USDCVN 9722554 for 38 CFR 1.218 (b): (90Z) (06) Failure to comply with Signs of a Directive and Restrictive Nature-Posted for Safety Purposes.

At 0500, I issued Powers his USDCVN and Notice to Appear form for Veterans Court, which Powers signed both forms.

Case Closed.

## Prepared By:

JENKINS, TERRANCE E(TERRANCE.JENKINS@VA.GOV)

## Submitted Date

05/10/2021 0249

## Signature

## Reviewed By/Date

JOHNSON, LACARIO A 05/10/2021 1247